Amendments to the Claims:

This listing of claims will replace all prior versions, and listings, of claims in the application:

1. (Currently Amended) A method executed in a computer system for managing an insurance insolvency comprising:

performing a transaction in connection with one of an insurance claim and an unearned premium;

determining in a computer system a corresponding insurance account in accordance with information about the one of the insurance claim and the unearned premium, the information including a relationship to at least one state and at least one line of insurance associated with the corresponding insurance account;

automatically identifying and designating a state fund for each state associated with the insurance insolvency;

associating with at least one of the state funds the corresponding insurance account with the corresponding relationship to at least one of the states associated with the insurance insolvency in the computer system;

associating with the insurance account the at least one line of insurance;

identifying in the computer system at least one of a state statute, regulation and rule relating to the at least one line of insurance associated with the insurance account; and

adjusting in the computer system an amount associated with the corresponding insurance account with the corresponding relationship to at least one of the states associated with the insurance insolvency in accordance with the transaction ~~performing at least one insolvency related service in connection with said insurance solvency~~ based on the identified at least one of a state statute, regulation and rule and the at least one line of insurance associated with the insurance account.

2. (Previously Presented) The method of Claim 1, further comprising:

associating at least one industry standard code with said insurance account and said at least one line of insurance in the computer system.

3. (Original) The method of Claim 2, wherein said insurance account is associated with a plurality of lines of insurance.

4. (Original) The method of Claim 3, wherein said insurance account is

associated with at least two lines of insurance each being of type commercial automobile, worker's compensation, homeowner's and fire.

5. (Original) The method of Claim 2, wherein said insurance account is associated with one line of insurance being of type commercial automobile, worker's compensation, homeowner's and fire.

6. (Original) The method of Claim 2, further comprising:

associating a group with a first of said each states having a corresponding state fund; and

associating at least one member with said group.

7. (Original) The method of Claim 6, further comprising:

storing information in the computer system representing a relationship between said state fund and said associated insurance account and said at least one line of insurance.

8. (Original) The method of Claim 7, further comprising:

representing a merger of at least two members by combining portions of said information stored in the computer system.

9. (Original) The method of Claim 8, further comprising:

modifying a relationship between said at least two members represented in the computer system.

10. (Original) The method of Claim 7, further comprising:

representing a split of one member into at least two entities using portions of said information stored in the computer system.

11. (Original) The method of Claim 10, further comprising:

modifying a relationship represented in said computer system of said one member corresponding to said split into said at least two entities.

12. (Previously Presented) The method of Claim 1, further comprising:

determining an insurance account from which a payment is made in the computer system.

13. (Original) The method of Claim 12, wherein said payment is made in connection with at least one of: a claim and an unearned premium.

14. (Original) The method of Claim 13, further comprising:

tracking payments; and

displaying an accounting of said payments with respect to a predetermined estimated amount of payments.

15. (Original) The method of Claim 14, further comprising:

tracking total payments made prior to said insolvency.

16. (Original) The method of Claim 15, further comprising:

tracking monies in connection with a recovery amount.

17. (Previously Presented) The method of Claim 16, wherein said recovery amount comprises at least one of: a salvage amount, a subrogation recovery, a second injury amount, a cost of living adjustment, and net worth.

18. (Previously Presented) The method of Claim 1, further comprising:

creating a diary entry in the computer system including information about one of: a claim and unearned premium; and

sending said diary entry to at least one user.

19. (Original) The method of Claim 18, wherein said sending said diary entry is performed automatically in response to an occurrence of a predefined event.

20. (Original) The method of Claim 19, wherein said predefined event is one of:

deleting a pending payment, closing one of a claim and an unearned premium, upon rejection of a closing one of a claim and unearned premium, modifying a line of insurance, deleting a line of insurance, sending a note to a reviewer, adjusting a reserve, adding a new taxpayer, and modifying an existing taxpayer.

21. (Previously Presented) The method of Claim 19, wherein the method further comprises:

creating an account for a user specifying a predetermined limit;

specifying, by said user, a reserve amount above said predetermined limit; and

sending said diary entry to a manager for approval in response to said user specifying said reserve amount.

22. (Previously Presented) The method of Claim 18, wherein said sending said diary entry is performed in response to a first user creating said diary entry, and the method further comprises:

said first user selecting at least one other user to which said diary entry is sent.

23. (Previously Presented) The method of Claim 1, further comprising:

associating in the computer system at least one note with an insurance claim;

associating in the computer system a blocked status with said insurance claim; and

generating in the computer system, in response to setting said blocked status, a note to at least one user indicating why said insurance claim has a blocked status.

24. (Original) The method of Claim 23, further comprising:

automatically notifying a first user when a second user attempts to perform a predetermined operation on said insurance claim having said blocked status.

25. (Cancelled).

26. (Previously Presented) The method of Claim 1, further comprising:

generating a data file including information about at least one of an unearned premium and a claim, said data file being used as an input file into an accounting system.

27. (Original) The method of Claim 26, further comprising:

generating general ledger entries, said general ledger entries being included in said data file.

28. (Previously Presented) The method of Claim 1, further comprising:

associating information about an insurance claim with said corresponding insurance account;

entering a note associated with an insurance claims, said note including descriptive information about said claim entered by a claim handler; and

providing for said note to be available for reading by another user.

29. (Previously Presented) The method of Claim 1, further comprising:

recording information about an error in a log file included in a client system.

30. (Original) The method of Claim 29, further comprising:

auditing said transaction by recording audit information about said transaction.

31. (Previously Presented) The method of Claim 30, wherein said audit information comprises at least one of: date and time information, transaction type, data values prior to modification by said transaction, and user performing said transaction.

32. (Previously Presented) The method of Claim 1, further comprising:

generating in the computer system an incomplete status of a record including information about a claim, obtaining additional information about said claim;

modifying in the computer system said record to include said additional information; and

converting in the computer system said incomplete status associated with said record to a claim status.

33. (Previously Presented) The method of Claim 1, further comprising:

assigning in the computer system at least one role to a first user have a first set of security permissions and access limits; and

determining in the computer system, using said first set of security permissions and access limits, whether to allow a user to perform an operation in connection with said insurance account.

34. (Currently Amended) A computer readable medium having stored thereon instructions for managing an insurance insolvency which when executed by a

processor, cause the processor to perform the steps comprising:

performing a transaction in connection with one of an insurance claim and an unearned premium;

determining ~~in a computer system~~ a corresponding insurance account in accordance with information about the one of the insurance claim and the unearned premium, the information including a relationship to at least one state and at least one line of insurance associated with the corresponding insurance account;

automatically identifying and designating a state fund for each state associated with the insurance insolvency;

associating with at least one of the state funds the corresponding insurance account with the corresponding relationship to at least one of the states associated with the insurance insolvency;

associating with the insurance account the at least one line of insurance;

identifying in the computer system at least one of a state statute, regulation and rule relating to the at least one line of insurance associated with the insurance account; and

adjusting ~~in the computer system~~ an amount associated with the corresponding insurance account with the corresponding relationship to at least one of the states associated with the insurance insolvency in accordance with the transaction ~~performing at least one insolvency related service in connection with said insurance solvency~~ based on the identified at least one of a state statute, regulation and rule and the at least one line of insurance associated with the insurance account.

35. (Previously Presented) The computer readable medium of Claim 34, further comprising:

associating at least one industry standard code with said insurance account and said at least one line of insurance.

36. (Previously Presented) The computer readable medium of Claim 35, wherein said insurance account is associated with a plurality of lines of insurance.

37. (Previously Presented) The computer readable medium of Claim 36, wherein said insurance account is associated with at least two lines of insurance each being of

type commercial automobile, worker's compensation, homeowner's and fire.

38. (Previously Presented) The computer readable medium of Claim 36, wherein said insurance account is associated with one line of insurance being of type commercial automobile, worker's compensation, homeowner's, and fire.

39. (Previously Presented) The computer readable medium of Claim 35, further comprising:

associating a group with a first of said each states having a corresponding state fund; and

associating at least one member with said group.

40. (Previously Presented) The computer readable medium of Claim 39, further comprising:

storing information in a computer system representing a relationship between said state fund and said associated insurance account and said at least one line of insurance.

41. (Previously Presented) The computer readable medium of Claim 40, further comprising:

representing a merger of at least two members by combining portions of said information stored in the computer system.

42. (Previously Presented) The computer readable medium of Claim 41, further comprising:

modifying a relationship between said at least two members represented in the computer system.

43. (Previously Presented) The computer readable medium of Claim 40, further comprising:

representing a split of one member into at least two entities using portions of said information stored in the computer system.

44. (Previously Presented) The computer readable medium of Claim 43, further comprising:

modifying a relationship represented in said computer system of said

one member corresponding to said split into said at least two entities.

45. (Previously Presented) The computer readable medium of Claim 34, further comprising:

determining an insurance account from which a payment is made.

46. (Previously Presented) The computer readable medium of Claim 45, wherein said payment is made in connection with at least one of: a claim and an unearned premium.

47. (Previously Presented) The computer readable medium of Claim 46, further comprising:

tracking payments; and

displaying an accounting of said payments with respect to a predetermined estimated amount of payments.

48. (Previously Presented) The computer readable medium of Claim 47, further comprising:

tracking total payments made prior to said insolvency.

49. (Previously Presented) The computer readable medium of Claim 48, further comprising:

tracking monies in connection with recovery amounts.

50. (Previously Presented) The computer readable medium of Claim 49, wherein said recovery amounts comprises at least one of: a salvage amount, a subrogation recovery, a second injury amount, a cost of living adjustment, and a net worth.

51. (Previously Presented) The computer readable medium of Claim 34, further comprising:

creating a diary entry including information about one of: a claim and unearned premium; and

sending said diary entry to at least one user.

52. (Previously Presented) The computer program of Claim 50, wherein said machine executable code for sending said diary entry is executed automatically in response to

an occurrence of a predefined event.

53. (Previously Presented) The computer readable medium of Claim 52, further comprising detecting said predefined event, wherein said predefined event is one of: deleting a pending payment, closing one of a claim and an unearned premium, upon rejection of a closing one of a claim and unearned premium, modifying a line of insurance, deleting a line of insurance, sending a note to a reviewer, adjusting a reserve, adding a new taxpayer, and modifying an existing taxpayer.

54. (Previously Presented) The computer readable medium of Claim 52, further comprises:

creating an account for a user specifying a predetermined limit;

specifying, by said user, a reserve amount above said predetermined limit; and

sending said diary entry to a manager for approval in response to said user specifying said reserve amount.

55. (Previously Presented) The computer readable medium of Claim 51, wherein said sending said diary entry executes in response to detecting a first user creating said diary entry, and the computer readable medium further comprises:

said first user selecting at least one other user to which said diary entry is sent.

56. (Previously Presented) The computer readable medium of Claim 34, further comprising:

associating at least one note with an insurance claim;

associating a blocked status with said insurance claim; and

generating, in response to setting said blocked status, a note to at least one user indicating why said insurance claim has a blocked status.

57. (Previously Presented) The computer readable medium of Claim 45, further comprising:

automatically notifying a first user when a second user attempts to perform a predetermined operation on said insurance claim having said blocked status.

58. (Cancelled)

59. (Previously Presented) The computer readable medium of Claim 34, further comprising:

generating a data file including information about at least one of an unearned premium and a claim, said data file being used as an input file into an accounting system.

60. (Previously Presented) The computer readable medium of Claim 59, further comprising:

generating general ledger entries, said general ledger entries being included in said data file.

61. (Previously Presented) The computer readable medium of Claim 34, further comprising:

associating information about an insurance claim with said corresponding insurance account;

entering a note associated with an insurance claims, said note including descriptive information about said claim entered by a claim handler; and

providing for said note to be available for reading by another user.

62. (Previously Presented) The computer readable medium of Claim 34, further comprising:

recording information about an error in a log file included in a client system.

63. (Previously Presented) The computer readable medium of Claim 62, further comprising:

auditing said transaction by recording audit information about said transaction.

64. (Previously Presented) The computer readable medium of Claim 63, wherein said audit information comprises at least one of: date and time information, transaction type, data values prior to modification by said transaction, and user performing said transaction.

65. (Previously Presented) The computer readable medium of Claim 34, further comprising:

generating an incomplete status of a record including information about a claim;

obtaining additional information about said claim;

modifying said record to include said additional information; and

converting said incomplete status associated with said record to a claim status.

66. (Previously Presented) The computer readable medium of Claim 34, further comprising:

assigning at least one role to a first user have a first set of security permissions and access limits; and

determining, using said first set of security permissions and access limits, whether to allow a user to perform an operation in connection with said insurance account.

67. (Currently Amended) A computer system for managing an insurance insolvency, the system comprising:

a transaction system that performs a transaction in connection with one of an insurance claim and an unearned premium;

an insurance account identification system that determines a corresponding insurance account in accordance with information about the one of the insurance claim and the unearned premium, the information including a relationship to at least one state and at least one line of insurance associated with the corresponding insurance account;

a designation system in the computer system that automatically identifies and designates a state fund for each state associated with the insurance insolvency;

a state fund association system in the computer system associates with at least one of the state funds ~~fund~~ an insurance account with the corresponding relationship to at least one of the states associated with the insurance insolvency;

an insurance account association system in the computer system that associates with the insurance account the at least one line of insurance;

an identification system that identifies in the computer system at least one of a state statute, regulation and rule relating to the at least one line of insurance associated with the insurance account; and

an insolvency processing system that <u>adjusts an amount associated with the corresponding insurance account in accordance with the transaction</u> ~~adjusting in the computer system an amount associated with the corresponding insurance account with the corresponding relationship to at least one of the states associated with the insurance insolvency in accordance with the transaction performs at least one insolvency related service in connection with said insurance solvency~~ based on the identified at least one of a state statute, regulation and rule and the at least one line of insurance associated with the insurance account.

68. (Previously Presented) The system of Claim 67, further comprising an industry code association system that associates at least one industry standard code with the insurance account and the at least one line of insurance.

69. (Previously Presented) The system of Claim 68, wherein the insurance account is associated with a plurality of lines of insurance.

70. (Previously Presented) The system of Claim 69, wherein the insurance account is associated with at least two lines of insurance each being of type commercial automobile, worker's compensation, homeowner's and fire.

71. (Previously Presented) The system of Claim 68, wherein the insurance account is associated with one line of insurance being of type commercial automobile, worker's compensation, homeowner's and fire.

72. (Previously Presented) The system of Claim 68, further comprising:

a group association system in the computer system that associates a group with a first of the each states having a corresponding state fund; and

a member association system in the computer system that associates at least one member with the group.

73. (Previously Presented) The system of Claim 72, further comprising:

a storage system in the computer system that stores information

representing a relationship between the state fund and the associated insurance account and the at least one line of insurance.

74. (Previously Presented) The system of Claim 73, further comprising:

a representation system in the computer system that represents a merger of at least two members by combining portions of the information stored.

75. (Previously Presented) The system of Claim 74, further comprising:

a modification system in the computer system that modifies a relationship between the at least two members represented.

76. (Previously Presented) The system of Claim 73, further comprising:

a representation system in the computer system that represents a split of one member into at least two entities using portions of the information stored in the computer system.

77. (Previously Presented) The system of Claim 76, further comprising:

a modification system in the computer system that modifies a relationship represented in the computer system of the one member corresponding to the split into the at least two entities.

78. (Previously Presented) The system of Claim 67, further comprising:

a determination system in the computer system that determines an insurance account from which a payment is made in the computer system.

79. (Previously Presented) The system of Claim 78, wherein the payment is made in connection with at least one of: a claim and an unearned premium.

80. (Previously Presented) The system of Claim 79, further comprising:

a tracking system in the computer system that tracks payments; and

a display system that displays an accounting of the payments with respect to a predetermined estimated amount of payments.

81. (Previously Presented) The system of Claim 80, wherein the tracking system tracks total payments made prior to the insolvency.

82. (Previously Presented) The system of Claim 81, wherein the tracking

system tracks monies in connection with a recovery amount.

83. (Previously Presented) The system of Claim 82, wherein the recovery amount comprises at least one of: a salvage amount, a subrogation recovery, a second injury amount, a cost of living adjustment, and net worth.

84. (Previously Presented) The system of Claim 67, further comprising:

a diary system in the computer system that creates a diary entry including information about one of: a claim and unearned premium; and

a communication system that sends the diary entry to at least one user.

85. (Previously Presented) The system of Claim 84, wherein the communication system automatically sends the diary entry in response to an occurrence of a predefined event.

86. (Previously Presented) The system of Claim 85, wherein the predefined event is one of:

deleting a pending payment, closing one of a claim and an unearned premium, upon rejection of a closing one of a claim and unearned premium, modifying a line of insurance, deleting a line of insurance, sending a note to a reviewer, adjusting a reserve, adding a new taxpayer, and modifying an existing taxpayer.

87. (Previously Presented) The system of Claim 85, wherein the system further comprises:

an account system in the computer system that creates an account for a user specifying a predetermined limit and specifies, by the user, a reserve amount above the predetermined limit; and wherein the communication system sends the diary entry to a manager for approval in response to the user specifying the reserve amount.

88. (Previously Presented) The system of Claim 84, wherein the communication system sends the diary entry in response to a first user creating the diary entry, and the system further comprises a user selection system in the computer system that allows the first user to select at least one other user to which the diary entry is sent.

89. (Previously Presented) The system of Claim 67, further comprising:

an insurance claim association system in the computer system that associates at least one note with an insurance claim;

a status system in the computer system that associates a blocked status with the insurance claim; and

a communication system in the computer system that generates, in response to setting the blocked status, a note to at least one user indicating why the insurance claim has a blocked status.

90. (Previously Presented) The system of Claim 89, wherein the communication system automatically notifies a first user when a second user attempts to perform a predetermined operation on the insurance claim having the blocked status.

91. (Cancelled).

92. (Previously Presented) The system of Claim 67, further comprising:

a data file system in the computer system that generates a data file including information about at least one of an unearned premium and a claim, the data file being used as an input file into an accounting system.

93. (Previously Presented) The system of Claim 92, further comprising a ledger system in the computer system that generates general ledger entries, the general ledger entries being included in the data file.

94. (Previously Presented) The system of Claim 67, further comprising:

a corresponding insurance account association system in the computer system that associates information about an insurance claim with the corresponding insurance account;

a note system in the computer system that enters a note associated with an insurance claims, the note including descriptive information about the claim entered by a claim handler; and

providing for the note to be available for reading by another user.

95. (Previously Presented) The system of Claim 67, further comprising:

a recordation system in the computer system that records information about an error in a log file included in a client system.

96. (Previously Presented) The system of Claim 95, further comprising:

an audit system in the computer system that audits the transaction by recording audit information about the transaction.

97. (Previously Presented) The system of Claim 96, wherein the audit information comprises at least one of: date and time information, transaction type, data values prior to modification by the transaction, and user performing the transaction.

98. (Previously Presented) The system of Claim 67, further comprising:

a status system in the computer system generating in the computer system an incomplete status of a record including information about a claim, obtaining additional information about the claim;

a modification system in the computer system that modifies the record to include the additional information; and

a conversion system in the computer system that converts the incomplete status associated with the record to a claim status.

99. (Previously Presented) The system of Claim 67, further comprising:

an assignment system in the computer system that assigns at least one role to a first user have a first set of security permissions and access limits; and

a security determination system in the computer system that determines, using the first set of security permissions and access limits, whether to allow a user to perform an operation in connection with the insurance account.

100. (Previously Presented) The method of Claim 1, wherein the performing at least one insolvency related service in connection with said insurance solvency further comprises:

entering one or more claims from said insurance solvency into the computer system; and

processing the entered one or more claims from said insurance insolvency based on the identified at least one of a state statute, regulation and rule and the insurance account and the at least one line of insurance associated with each of the one or more entered claims.

101. (Previously Presented) The method of Claim 1, wherein the performing

at least one insolvency related service in connection with said insurance solvency further comprises:

determining if an assessment is needed based on a size of said insurance solvency, at least an amount in the designated state fund, and the identified at least one of a state statute, regulation and rule; and

performing an assessment based on the determination of the need of the assessment.

102. (Previously Presented) The method of Claim 1, wherein the performing at least one insolvency related service in connection with said insurance solvency further comprises issuing a refund for each policy in the at least one line of insurance based on a calculation of an unearned premium and the identified at least one of a state statute, regulation and rule.

103. (Previously Presented) The method of Claim 1, wherein the performing at least one insolvency related service in connection with said insurance solvency further comprises processing one or more additional claims in the at least one line of insurance for a first period of time after said insurance solvency based on the identified at least one of a state statute, regulation and rule.

104. (Previously Presented) The computer readable medium of Claim 34, wherein the performing at least one insolvency related service in connection with said insurance solvency further comprises:

entering one or more claims from said insurance solvency into the computer system; and

processing the entered one or more claims from said insurance insolvency based on the identified at least one of a state statute, regulation and rule and the insurance account and the at least one line of insurance associated with each of the one or more entered claims.

105. (Previously Presented) The computer readable medium of Claim 34, wherein the performing at least one insolvency related service in connection with said insurance solvency further comprises:

determining if an assessment is needed based on a size of said insurance solvency, at least an amount in the designated state fund, and the identified at least one of a

state statute, regulation and rule; and

performing an assessment based on the determination of the need of the assessment.

106. (Previously Presented) The computer readable medium of Claim 34, wherein the performing at least one insolvency related service in connection with said insurance solvency further comprises issuing a refund for each policy in the at least one line of insurance based on a calculation of an unearned premium and the identified at least one of a state statute, regulation and rule.

107. (Previously Presented) The computer readable medium of Claim 34, wherein the performing at least one insolvency related service in connection with said insurance solvency further comprises processing one or more additional claims in the at least one line of insurance for a first period of time after said insurance solvency based on the identified at least one of a state statute, regulation and rule.

108. (Previously Presented) The system of Claim 67, wherein the insolvency processing system performs at least one insolvency related service in connection with said insurance solvency further comprises an input processing interface that enters one or more claims from said insurance solvency into the computer system and processes the entered one or more claims from said insurance insolvency based on the identified at least one of a state statute, regulation and rule and the insurance account and the at least one line of insurance associated with each of the one or more entered claims.

109. (Previously Presented) The system of Claim 67, wherein the insolvency processing system performs at least one insolvency related service in connection with said insurance solvency further comprises an assessment processing system that determines if an assessment is needed based on a size of said insurance solvency, at least an amount in the designated state fund, and the identified at least one of a state statute, regulation and rule and performs an assessment based on the determination of the need of the assessment.

110. (Previously Presented) The system of Claim 67, wherein the insolvency processing system performs at least one insolvency related service in connection with said insurance solvency further comprises an unearned premium processing system that issues a refund for each policy in the at least one line of insurance based on a calculation of an

unearned premium and the identified at least one of a state statute, regulation and rule.

111. (Previously Presented) The system of Claim 67, wherein the insolvency processing system performs at least one insolvency related service in connection with said insurance solvency further comprises a claims processing system that process one or more additional claims in the at least one line of insurance for a first period of time after said insurance solvency based on the identified at least one of a state statute, regulation and rule.

Amendments to the Specification:

Please replace the paragraph beginning at page 7, line 19, with the following amended paragraph:

Figure 26A illustrates the relationship between ~~Figures 26B through 26H~~ Figures 26B through 26BB in forming an example of one embodiment of a representation of a database schema 600 for unearned premium and claims processing, and other common functionality;

Please replace the paragraph beginning at page 8, line 1, with the following amended paragraph:

~~Figures 26B through Figure 26H~~ Figures 26B through 26BB form an example of a representation of one embodiment of a database schema that may be used in connection with claims and unearned premium processing and other common functionality used between different modules; and

Please cancel the paragraph beginning at page 8, lines 5-6.

Please replace the paragraph beginning at page 8, line 8, with the following amended paragraph:

~~Figures 27 and 28~~ Figures 27A-28E are an example of a representation of a database schema in one embodiment that may be used in connection with assessment processing;

Please replace the paragraph beginning at page 90, line 1, with the following amended paragraph:

Generally, as described in more detail in paragraphs that follow, ~~Figures 26B through 26H~~ Figures 26B through 26BB form an example of one embodiment of a database schema that may be used in connection with unearned premiums, claims processing, assessment processing and common functionality between modules included in the system 10 of Figure 1. Referring now to Figure 26A, shown is an example of an embodiment of a

representation of the relationships between ~~Figures 26B through 26H~~ <u>Figures 26B through 26BB</u>.

Please replace the paragraph beginning at page 90, line 8, with the following amended paragraph:

Referring now to ~~Figure 26B~~ <u>Figures 26B-26F</u>, shown is an example of a first portion of the database schema representation in one embodiment that may be used in connection with representing data and relationships between data items used in connection with unearned premiums, claims processing and other common functionality that may be used by one or more modules in the computer system 10 of Figure 1. It should be noted that for the description accompanying ~~Figures 26B-26H, and Figures 27 and 28~~ <u>Figures 26B-26BB and Figures 27A- 27B and 28A-28E</u>, the database schema representation illustrates relationships between different entities which may be implemented, for example, as objects for use in a database. In this embodiment, the database schema of ~~Figures 26A-26I, 27~~ <u>Figures 26A-26CC</u> and ~~28~~ <u>Figures 27A- 27B and 28A-28E</u> is drawn using functionality of the Erwin software system by Computer Associates, Inc. Generally, described and shown is an entity relationship (E-R) model using this tool. This tool, and others, uses different notations for representing relationships between the entities. For example, in the representation included herein using the Erwin software tool, a portion of the lines drawn between entities describe an "identifying relationship" using the IDEF1X notation of the Erwin tool. An identifying relationship between two tables is a relationship in which an instance of child table is identified through its association with a parent table which means that the child table is dependent upon the parent table for its identity and cannot exist without it. In an identifying relationship, one instance of the parent table is related to multiple instances of the child. In reference to the database schema herein, the identifying relationship may be represented as a solid line with a diamond or filled circle at either end of the line. Other lines are included in the representation in accordance with the options of the software tool used herein. Other examples may use other notation that may vary.

Please replace the paragraph beginning at page 92, line 1, with the following amended paragraph:

What will now be described are general descriptions for each entity that may be included in an embodiment using the schema of ~~Figures 26A-26H~~ <u>Figures 26A-26BB</u>. Entity 602 corresponds to a check that may be issued, for example, using computer system 10 of Figure 1 for payment in connection with claims. Entity 604 corresponds to check staging information. Entity 606 corresponds to provider information such as a provider of service, for example, a taxpayer, finance company, adjuster and the like. Entity 608 corresponds to UP_Policy data which represents unearned premium policy information.

Please replace the paragraph beginning at page 92, line 9, with the following amended paragraph:

Referring now to ~~Figure 26C~~ <u>Figures 26G-26J</u>, shown is another portion of a representation of the database schema 600 for claims, unearned premium, assessment and other common functionality. Entity 612 is a representation of the member information. Entity 614 is a representation of the member group to which a member may belong. Entity 616 includes member financials and information associated with the financial status of a member. UDS coverage code entity 618 shows different fields that may be included in an embodiment in connection with UDS coverage code information. Entity 620 includes a representation of information that may be stored in connection with a line of insurance (LOI). Entity 622 describes those items that may be used in connection with insolvency UDS coverage codes. Entity 624 refers to an insolvency line of insurance entity. Entity 626 corresponds to split information, for example, as previously described herein in which a member may split into multiple members in connection with a corresponding business transaction. Entity 628 represents an assessment transaction and the information that may be included in it and associated with it. Entity 630 represents an entity corresponding to a claimant injury and associated information.

Please replace the paragraph beginning at page 93, line 1, with the following amended paragraph:

Referring now to ~~Figure 26D~~ <u>Figures 26K-26L</u>, shown as a third portion of a representation of a database schema 600. Entity number 632 represents information stored in connection with a financial cash receipt. Entity 634 represents assessment allocation information. Entity 636 represents information for combining members. Entity 638

corresponds to an entity representing an assessment financial status and information. Entity 640 represents assessment correspondence information. Entity 642 represents liquidator information and data.

Please replace the paragraph beginning at page 93, line 8, with the following amended paragraph:

Referring now to ~~Figure 26E~~ Figures 26M-26P, shown is a fourth portion of an example of the representation of the database schema 600 that may be used in connection with unearned premiums, claims, assessment processing, and common functionality processing. Entity 644 corresponds to an agent entity and associated information. Entity 646 corresponds to information that may be used in connection with a W-9 IRS tax information form. Entity 648 corresponds to member state fund information. Entity 650 represents reserve information. Entity 654 corresponds to a members nationwide premium information, for example, as may be used in connection with assessments. Entity 656 corresponds to the state fund lines of insurance per year and associated entity data. Entity 660 represents a file location entity and associated information, and entity 662 includes the claimant entity and associated data.

Please replace the paragraph beginning at page 93, line 19, with the following amended paragraph:

Referring now to ~~Figure 26F~~ Figures 26Q-26T, shown is a fifth portion of a representation of the database schema corresponding to 600 in accordance with Figure 26A. Entity 670 corresponds to an entity for the claimant UDS coverage code information. Entity 672 includes member premium insolvency information. Entity 674 represents a note entity and corresponding information. Entity 676 represents the state fund year member tracking policy holder information per year, per member, per state. Entity 678 represents a payment and associated information. Entity 680 corresponds to a system transaction such as in assigning a value and information in accordance with records stored within the system of this particular implementation. Entity 682 corresponds to a journal code entity which relates to an outside accounting module. Entity 684 corresponds to a reversal entity and associated information. Entity 686 corresponds to a cash receipt detail and associated information. Entity 688 corresponds to a recovery entity and associated information. Entity 690

corresponds to a member insurance account entity and associated information. Entity 692 corresponds to a state fund year status entity and associated information. Entity 694 corresponds to a GL (General Ledger) account entry and associated information. It should be noted that entity 692 represents information regarding premiums in connection with assessment processing, by state, by year.

Please replace the paragraph beginning at page 94, line 14, with the following amended paragraph:

Referring now to ~~Figure 26G~~ <u>Figures 26U-26Y</u>, shown is yet another portion of the database schema 600 in accordance with the previous descriptions shown in Figure 26A. Entity 700 corresponds to a claim entity and associated information. Entity 702 corresponds to a diary entry or note and corresponding data. Entity 704 corresponds to a state fund year insolvency and associated information. Entity 704 represents assessment information that may vary by state. This is similar to the information represented by entity 692 with the difference that this describes information on an insolvency level of granularity. Entity 706 corresponds to member premium information entity. Entity 708 corresponds to a diary history entity and associated information. Entity 710 corresponds to member ratio information, for example, as may be supplied by the NAIC and used in connection with performing assessments. Entity 712 corresponds to an employee role, for example, as may be assigned in connection with different security roles and functions. Entity 714 represents a particular role that an employee may be assigned. Entity 716 corresponds to an employee and employee information. Entity 718 corresponds to the toxic site and associated information.

Please replace the paragraph beginning at page 95, line 6, with the following amended paragraph:

Referring now to ~~Figure 26H~~ <u>Figures 26Z-26BB</u>, shown is another portion of the database schema 600 as described previously in connection with Figure 26A. Shown in ~~Figure 26H~~ <u>Figures 26Z-26BB</u> are details of the state fund state entity 720 and associated information, the premium base year entity and associated information 722, the state fund insurance account entity and associated information 724, the insurance account entity and associated information 726, and the GL transaction entity 728 and associated information.

Please replace the paragraph beginning at page 95, line 13, with the following amended paragraph:

It should be noted that in connection with ~~Figures 26B-26H~~ Figures 26B-26BB, various offline connectors are also shown as connecting common entities in the database schema description between the different entities representing relationships between the entities.

Please cancel the paragraph beginning at page 95, lines 17-18.

Please replace the paragraph beginning at page 95, line 20, with the following amended paragraph:

Referring now to ~~Figure 27~~ Figures 27A-27B, shown is an example of an embodiment of a database schema representation of the various NAIC tables. Recall that NAIC tables may store information as supplied by the National Association of Insurance Commissioners. This example includes an NAIC table 750 with seven entities and associated data fields or information. Included in the NAIC database schema representation 750 is the NAIC nationwide entity 752, the NAIC load entity 754, the NAIC member premium entity 756, the NAIC demographics entity 758, the NAIC net income entity 760, the NAIC surplus entity 762, and the NAIC load audit information 764. Generally, the NAIC nationwide information 752 includes nationwide premium information for all solvent members within states requested from the NAIC. The NAIC member premium entity 756 represents information for premiums of the different member insurance companies. The NAIC demographic 758 includes the different types of information provided in accordance with demographic information. Entity 754 represents a control table including status information about other tables included in ~~Figure 27~~ Figures 27A-27B except for entity 764.

Please replace the paragraph beginning at page 96, line 12, with the following amended paragraph:

Referring now to ~~Figure 28~~ Figures 28A-28E, shown is an example of a representation of a database schema for assessment module data that may be included in the database. The assessment data 770 includes a variety of different entities that may be

included in an embodiment. The format used in ~~Figures 26A - 26H, Figure 27 and Figure 28~~ <u>Figures 26A-26BB, Figures 27A-27B, and Figures 28A-28E</u> are similar, for example, in the form of an entity and the relationships between entities as may be illustrated by the connectors.